

No. 64-11**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Robert K. Wadsworth

Name of deceased

Richard Green Harwood

Age

77

years

3

months

20

days

Place of death

Cordaville Rd - Southerboro

Date of death

January 11 - 1964

Cause of death

Arteriosclerotic Heart Disease

Interment at

Cambridge  
Mt Auburn Cemetery

Date permit issued

January 1364

Certified by

Timothy P Stone

M. D.

No. 64-1**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)City or Town of Southern Mass.Name of deceased Richard Green HarwoodIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mt. Auburn Crematory, Watertown  
(Name of cemetery or crematory)on January 13, 1964Certified by Herbert C. Philpott, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 64-2

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Francis M. Wilson, Inc.  
28 College Ave. Somerville 44 Mass

Name of deceased Florence May Mahoney -

Age 75 years 8 months 24 days

Place of death Woodland Rd. Somerville

Date of death February 1, 1964

Cause of death Carcinoma, Ovary

Interment at Woodlawn Cemetery, Everett Mass

Date permit issued February 3, 1964

Certified by Samuel P. Stone M. D.

No. 64-2**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agnt. Bd of Health  
(Office issuing permit)City or Town of P.O. Box 97 - Southboro Mass.Name of deceased Florence May Maloney

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

**THE WOODLAWN CEMETERY  
EVERETT, MASS.**at .....  
(Name of cemetery or crematory)on **FEB 6 1964** .....Certified by A. H. Sampson  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-3**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of deceased

Michael S. Bruce

Age

13

years

5

months

14

days

Place of death

Metropolitan Water System

Date of death

2-15-64

Cause of death

Accidental Drowning

Interment at

Rural Cemetery

Date permit issued

Feb-18-64

Certified by

Walter F. Mahoney

M. D.

No. 64-3**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agent, Board of Health  
(Office issuing permit)City or Town of PO Box 97-Southboro Mass.Name of deceased Michael S. BruceIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory)on February 18, 1964Certified by Leo Bertuzzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. ....

64-4

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to .....

Donald C Morris

Name of deceased .....

Donald (Hicks) McClear

Age .....

53

years .....

months .....

17

days

Place of death .....

Leisure Home

Date of death .....

2-15-64

Cause of death .....

Presumably sudden -  
Coronary Sclerosis

Interment at .....

Newton Cemetery, Newton<sup>Mass</sup>

Date permit issued .....

Feb - 19 - 64

Certified by .....

Dwight F Mahoney

M. D.

No. 64-4**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Ag. & Board of Health  
(Office issuing permit)City or Town of Somerville Mass.Name of deceased Donald - (Hicks) Jr. ClairIf a U. S. War Veteran, specify what war, organization, etc.  
.....**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at NEWTON CEMETERY & CREMATORY  
(Name of cemetery or crematory)on Feb 20 - 1964Certified by [Signature]  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-5**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C. Marres

Name of deceased

James Joseph Gratton

Age

86

years

3

months

days

Place of death

At home

Date of death

May 4, 1964

Cause of death

Presumably  
Heart disease, Coronary occlusion

Interment at

Rural Cemetery

Date permit issued

May 5-1964

Certified by

S. Alden Guild

M. D.

No. 64-5**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased James J. Gralton

If a U. S. War Veteran, specify what war, organization, etc.

None**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southboro, Mass.  
(Name of cemetery or crematory)on May 6, 1964 10:30 A.M.Certified by Leo Buttrani, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 64-6

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald MorrisName of deceased Baby Girl TaylorAge \_\_\_\_\_ years \_\_\_\_\_ months 1 daysPlace of death Marlboro HospitalDate of death May 18-1964Cause of death Prematurely rupturedInterment at Rural CemeteryDate permit issued May 20-1964Certified by John J. Heppner M. D.

No. 64-6**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed***Board of Health**to Southboro, Mass.

(Office issuing permit)

City or Town of Southboro, Mass. Mass.Name of deceased Baby Girl Taylor

If a U. S. War Veteran, specify what war, organization, etc.

None**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.

(Name of cemetery or crematory)

on May 20 1964

Certified by

Leo Bertuzzi Supt.

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

14-7

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of deceased

Margaret (Crockett) Smith

Age

42

years

5

months

12

days

Place of death

Marlboro Rd - Southboro

Date of death

6-27-64

Cause of death

Hepatic Coma, Carcinoma of  
the pancreas,

Interment at

Rural Cemetery

Date permit issued

June 29, 1964

Certified by

William S George  
118 Union Ave - Framingham

M. D.

No. ....

**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Margaret (Crockett) SmithIf a U. S. War Veteran, specify what war, organization, etc.  
None

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**ENDORSEMENT***(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was  
disposed of in accordance with its termsat Rural Cemetery Southboro Mass.  
(Name of cemetery or crematory) (City or town)on June 30, 1964Certified by Leo Buttaigi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 64-8**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Dante M. Trioli

If a U. S. War Veteran, specify what war, organization, etc.

Hdq Co. 59th Sig. Bn. Ft. Jackson S.C.  
WWII**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro Mass  
(Name of cemetery or crematory) (City or town)on August 18, 1964Certified by Leo Bertozzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-8**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Ronald C. Morris

Name of deceased

Dante M. Trudi

Age

64

years

4

months

16

days

Place of death

Jurypike Road (Rte #9)

Date of death

August 15, 1964

Cause of death

Rupture of Esophageal Varices  
(Found dead in kitchen)

Interment at

Rural Cemetery

Date permit issued

August 18, 1964

Certified by

R. R. Rittenhouse

M. D.

No. 64-9

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to George Sessions Sons Co  
Worcester.Name of deceased Richard Dudley FayAge 73 years 7 months 26 daysPlace of death Parkerville Rd.Date of death 9/9/64Cause of death Arteriosclerotic Renal Disease.Interment at Rural - SouthboroDate permit issued 9/10/64Certified by Timothy P. Stone, M. D.

No. 64-9

## BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent, Board of Health  
(Office issuing permit)

City or Town of Southboro...... Mass.

Name of deceased .....*Richard Dudley Fay*.....

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.  
(Name of cemetery or crematory) (City or town)

on September 11, 1964 2 <sup>15</sup> p.m.

Certified by Don Bortugno  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 64-10

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

~~Donald John W. Sullivan~~

Name of deceased

Sidney P. Gibson

Age

60

years

4

months

days

Place of death

Dougherty Tool Co -  
Southon 9-16-64

Date of death

Pres. Coronary occlusion

Cause of death

Heart Disease

Interment at

Immaculate Conception  
Marlboro

Date permit issued

9-17-64

Certified by

S. Alda Givild

M. D.

Fred Egan

No. 64-10**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agent Board of Health  
John W. Sullivan  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Sidney P. GilsonIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Immaculate Conception, Marlboro  
(Name of cemetery or crematory)on Sept 19, 1964Certified by R. R. Henry J. Davis, Pastor  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. ....

64-11

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to .....

Donald C Morris

Name of deceased .....

Wallace Lynn Dyer

Age .....

85

years .....

5

months .....

22

days

Place of death .....

School Street, Southboro

Date of death .....

Sept 23- 1964

Cause of death .....

Bronchopneumonia

Arteriosclerotic Heart Disease

Interment at .....

Elmwood Cemetery, East  
Sumner, Maine

Date permit issued .....

9-25-64

Certified by .....

Timothy P. Stone

M. D.

No. 64-12**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of deceased James F. HortonAge 53 years 5 months 1 daysPlace of death Oran Street SouthboroDate of death October 7 - 1964Cause of death Carcinoma, lung  
undifferentiatedInterment at Rural Cemetery, SouthboroDate permit issued October 9 - 1964Certified by Timothy Stone M. D.



No. 64-12**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agent, Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Lewis F. HortonIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.  
(Name of cemetery or crematory)on October 10, 1964 - 10<sup>55</sup> AMCertified by Leo Bertinazzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-13**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of deceased William M. BoothAge 61 years 23 months 23 daysPlace of death Newton Street SouthboroDate of death 11-16-64Cause of death Asphyxiation, self-induced by placing plastic bag over head - SuicideInterment at Rural Cemetery, SouthboroDate permit issued November 18, 1964Certified by C Alden Guild M. D.

No. 64-13**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agent. Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased William M. BoothIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory)on November 18, 1964 - 2:30 PMCertified by Lor Burton Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-14**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of deceased Elizabeth (Abela) MorrisAge 85 years 10 months 10 daysPlace of death Cordaville Rd - SouthboroDate of death Nov 22 - 1964Cause of death Coronary ThrombosisInterment at Bay View Cemetery  
Sandwich, MassDate permit issued Nov - 24 - 1964Certified by Timothy P. Stone M. D.





The Commonwealth of Massachusetts  
EDWARD J. CRONIN  
SECRETARY OF THE COMMONWEALTH

No. 64-14

# OFFICIAL BURIAL (OR REMOVAL) PERMIT

Division of  
Vital Statistics

(Issued under the provisions of Chapter 114, sections 45 and 46, General Laws, as amended by Chapter 604, Acts of 1940.)

[This permit can be signed only by Board of Health or its agent appointed to issue such permits, of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, legibly written in durable black ink.]

Sutton

(City or town)

November 24 1964

(Date)

A satisfactory certificate of death having been filed, permission is hereby given to

Donald C Morris Man St - Sandwich Mass

(Name)

(Address)

for the removal from Elizabeth (Abela) Morris, and the interment

(To be filled out in case of removal)

at Bay View Cemetery in Sandwich Mass of the

body of Elizabeth who died 19

(Give full name of deceased)

(Month) (Day) (Year)

age ..... years, ..... months, ..... days.

Cause of death .....

If a U. S. War Veteran, specify what war, organization, etc. ....

Residence at time of death .....

(Signature of Agent of Board of Health, or, in towns where there is no Board of Health, of Town Clerk)

No. 64-14**BURIAL (OR REMOVAL) PERMIT***This Coupon to be returned immediately, properly endorsed*to Agent of Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Elizabeth (Abela) VarnasIf a U. S. War Veteran, specify what war, organization, etc.  
.....  
\_\_\_\_\_**ENDORSEMENT***(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was disposed  
of in accordance with its termsat .....  
(Name of cemetery or crematory)

on .....

Certified by .....  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-15

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Donald C Morris

Name of Deceased Katherine E. Meary

Age 74 years 3 months 4 days

Place of death Middle Rd - Southboro

Date of death December 5 - 1964

Cause of death Atherosclerotic Heart Disease

Interment at Immaculate Conception, Southboro

Date permit issued December 8 - 1964

Certified by Timothy P. Stone — M. D.



If there is no officer in charge, undertaker should sign and return this stub.



No. 104-16**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Julie Ann HilditchAge 3 years 1/2 months  daysPlace of death Southville Rd - Southboro, Mass.Date of death Dec. 23 - 1964Cause of death Accidental death due to asphyxia  
from aspiration of vomitus -  
(found dead in crib)Interment at Rural CemeteryDate permit issued December 23 - 1964Certified by S. Alden Guied M. D.

No. 64-16

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Julie Ann Helitch

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.  
(Name of cemetery or crematory) (City or town)

on December 24, 1964 11:30 AM.

Certified by Leo Bertucci Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 64-17**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to John W. SullivanName of Deceased Harald WardAge 69 years ..... months 20 daysPlace of death Lied in car Marlboro Rd Rt 85Date of death December 26 - 1964Cause of death Natural causes - Coronary artery disease, myocardial infarction  
(Sudden death at wheel of car)Interment at Maplewood Cemetery,  
Marlboro.Date permit issued December - 30, 1964Certified by S. Alden Guild M. D.



No. 65-1

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Donald C Morris

Name of Deceased Robert Foreign Scharges

Age 26 years 6 months 7 days

Place of death Rt 30 - Southboro, Mass

Date of death 12 - 4 - 65

Cause of death Accidental death - in automobile,  
fracture of skull - brain injuries

Interment at Greenwood Cemetery, Brooklyn, N.Y.

Date permit issued 1 - 5 - 65

Certified by S Alden Guild M. D.



No. 65-2**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of Deceased

Frederick Luther Merlan <sup>Marrell</sup>

Age

62 years 5 months 10 days

Place of death

White Oak Rd -  
Southern

Date of death

January 27 - 1945

Cause of death

Cancer, generalized - metastasis

Interment at

Rural Cemetery - Southern

Date permit issued

1-29-65

Certified by

David P. Carey M. D.

No. 65-2**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Frederick Luther MontauvilleIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)on January 29, 1965Certified by Lee Buttery, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 65-3**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased George Edward HarlanetAge 61 years 3 months 11 daysPlace of death Main St. Southboro, Mass  
ResidenceDate of death 3/4/65Cause of death Under investigationInterment at Blue Hills Cemetery  
Brantree, MassDate permit issued March 5 - 1965Certified by S. Alden Field M. D.

No. 65-3

## BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent-Board of Health  
(Office issuing permit)

(Office issuing permit)

City or Town of Somerville Mass.

Name of deceased George Edward Harlaumont

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Blue Hill Cemetery, Braintree  
(Name of cemetery or crematory) (City or town)

(Name of cemetery or crematory)

(City or town)

on ..... March 6, 1965 -

Certified by Gerald M. Ridge  
(Signature of Superintendent, cemetery or crematory)

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 65-4**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Cecil H. StifflerAge 49 years 4 months 3 daysPlace of death Tara DriveDate of death 4-5-65Cause of death Natural causes - 1 heart disease  
Presumably coronary occlusion  
(Sudden death)Interment at Rural CemeteryDate permit issued April 7-1965Certified by S. Alden Guild M. D.

No. 654

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agent Brand & Heaton  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Cecil H. Stiffler

If a U. S. War Veteran, specify what war, organization, etc.  
World War II - 1st Lt. Btry -  
211th F.A. Bn.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on April 8, 1965

Certified by Per Br. Temp. Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 65-5**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Edward B. Waite Jr.Age 47 years 10 months 16 daysPlace of death U.S. Post OfficeDate of death Sept 16 - 1965Cause of death Self-inflicted gun shot wound  
of the head - SuicideInterment at Rural CemeteryDate permit issued September 18 - 1965Certified by S. Alden - Guild M. D.

No. 65-3**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent of Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Edward B. White Jr.

If a U. S. War Veteran, specify what war, organization, etc.

World - War II**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)on September 19, 1965 2<sup>35</sup> P.M.Certified by Per Bartyn Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 65-6**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Raymond F. DoughertyAge 69 years 4 months 21 daysPlace of death Coronary artery disease.  
presumably myocardial  
infarction (sudden death)Date of death October 23-1965Cause of death Thrombosed ScurtaneousInterment at St. Michael's - Hudson MassDate permit issued October 25-1965Certified by S. Alden Guild M. D.

No. 65-6**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent of Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Raymond F. Dougherty

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St Michael's Cemetery Hudson  
(Name of cemetery or crematory) (City or town)on Oct 26 1965Certified by Rev L D Chadbourne  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 65-7

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Minnie Regina StockwellAge 79 years 10 months 16 daysPlace of death At homeDate of death December 24 - 1965Cause of death Coronary ThrombosisInterment at Rural CemeteryDate permit issued December 27, 1965Certified by Donald E. Howe - M. D.

No. 65-7**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent of Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Messine Regina Stockwell

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)on December 27, 1965 2 45 PMCertified by Leo Antonop Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 66-1

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Donald C Morris

Name of Deceased Louis James Mahorine

Age 41 years 6 months 15 days

Place of death 3 Pleasant St. Jayville

Date of death April 22 1966

Cause of death acute Coronary occlusion  
Coronary heart Disease

Interment at Rural Cemetery

Date permit issued April 25 - 1966

Certified by John Paul Ahearn M. D.

No. 626-1**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Louis James Mahan

If a U. S. War Veteran, specify what war, organization, etc.

W. W. II**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)on April 26, 1966 - 11<sup>10</sup> AMCertified by Leo Buttrick Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 46-2

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Donald C Morris

Name of Deceased Harry M Wyld

Age 73 years 6 months 27 days

Place of death 21 Flag of Road - Sutton

Date of death May 19 - 1966

Cause of death Carcinoma Prostate

Interment at Rural Crematory, Worcester Mass

Date permit issued May 19 - 1966

Certified by Timothy P Stone M. D.

No. 66-2

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Agmt - Board of Health  
(Office issuing permit)

City or Town of Smithfield Mass.

Name of deceased Harry M. W. Wilde

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

RURAL CEMETERY CREMATORY, WORCESTER, MASS.

at \_\_\_\_\_  
(Name of cemetery or crematory) (City or town)

on May 23, 1966

Certified by Eugene J. Hansen  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 66-3**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C. MorrisName of Deceased Alice (Dickens) ParmenterAge 72 years 3 months 21 daysPlace of death 119 North Elm Road - Sutton MassDate of death May 20 - 1966Natural causes - HypertensiveCause of death Cardiovascular disease -Cerebro-vascular - accident foundInterment at Rural Cemetery, WorcesterDate permit issued May 21, 1966Certified by S. Alden-Guild M. D.

No. 66-3

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Alice (Dickens) Parmenter

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms.

at RURAL CEMETERY CREMATORY, WORCESTER, MASS.  
(Name of cemetery or crematory) (City or town)

on May 24, 1966

Certified by Ernest Hansen  
(Signature of Superintendent, cemetery or crematory)

E.

If there is no officer in charge, undertaker should sign and return this stub.

No. 66-4

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Donald C Morris

Name of Deceased Anthony Pessolano

Age 76 years 11 months 27 days

Place of death 43 Boston Rd. Southboro

Date of death July 29 - 1966

Cause of death Hepatic Coma  
Gastric Cancer Tumor

Interment at Rural Cemetery

Date permit issued 8-1-66

Certified by Marilyn Messerly M. D.

No. 66-4**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent of Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Anthony PessalansIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)on August 1, 1966 2 30 PMCertified by Leo Pantanelli Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of Deceased

Louise Ann (Bossi) Berry

Age

39

years

—

months

28

days

Place of death

6 Cherry St Fayville Mass

Date of death

9-20-66

Cause of death

Glioma of Thalamus

Interment at

Rural Cemetery

Date permit issued

9-23-66

Certified by

Peter P Cottone

M. D.

No. 66-5

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed.*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Louise Ann Berri (Berry)

If a U. S. War Veteran, specify what war, organization, etc.

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.  
(Name of cemetery or crematory) (City or town)

on September 24, 1966 11<sup>58</sup> AM

Certified by Leo Buttery, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 66-5

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Herman R. WheelerName of Deceased Timothy R. YoungAge ..... years ..... months 2 daysPlace of death Lake Road, Brookfield, Mass.Date of death 6-23-59Cause of death PrematurityInterment at Brookfield CemeteryDate permit issued October 18-1966Certified by ..... M. D.

to Agent - Board of Health  
(Office issuing permit)

City or Town of Saunders Mass.

Name of deceased Timothy R. Young

If a U. S. War Veteran, specify what war, organization, etc.

at Brookfield Cemetery (Name of cemetery or crematory) (City or town)

on October 22, 1966

Certified by Harold L. May, Jr.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Daniel C MorrisName of Deceased William Charles Eric WisemanAge 58 years 8 months 14 daysPlace of death #3 Found dead on StreetDate of death Dec. 4 - 1966Cause of death Natural causes; Heart disease  
pres. myocardial infarctionInterment at Rural Crematory - Worcester, MassDate permit issued December 5, 1966Certified by S. Alden Guild M. D.

No. 66-6

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased William Charles Eric Wessman

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at RURAL CEMETERY CREMATORY, WORCESTER, MASS.  
(Name of cemetery or crematory) (City or town)

on December 6, 1966

Certified by Ernest Hansen  
(Signature of Superintendent, cemetery or crematory)  
E.

If there is no officer in charge, undertaker should sign and return this stub.

No. 66-7

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Henry A. Chermore

Name of Deceased Belle L. Perry) Harcross.

Age 91 years 7 months 25 days

Place of death 223 Parkerville Rd. Southwell

Date of death December 7 - 1966

Cause of death Arteriosclerotic Heart Disease

Interment at Rural Cemetery - Southwell

Date permit issued December 8 - 1966

Certified by Junior P. Stone M. D.

No. 66-7

# BURIAL (OR REMOVAL) PERMIT

*This coupon to be returned immediately, properly endorsed*

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Belle H. (Perry) Morcross

If a U. S. War Veteran, specify what war, organization, etc.

## ENDORSEMENT

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on December 9, 1966 2:15 P.M.

Certified by Leo Bertinazzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to John P. Lowe

Name of Deceased Blanche E. Chisholm

Age 76 years months days

Place of death Water - west side of White Bagley Rd  
Asphyxiation by Submersion

Date of death December 20 - 1966

Cause of death Asphyxiation by Submersion  
SuicideInterment at Immaculate Conception Co -  
Marlboro Mass

Date permit issued December 22 - 1966

Certified by Robert R. Littenhouse M. D.

No. 66-8**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Blanche ChristensenIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Immaculate Conception Harbor  
(Name of cemetery or crematory) (City or town)on Dec 23, 1966Certified by Rev Thomas J. Lester  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 67-1

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to David C MorrisName of Deceased (Cherent)  
Marie-Antoinette WisemanAge 63 years 6 months 2 daysPlace of death H3 Main St (Choate House)  
BostonDate of death April 7 - 1967Cause of death Asphyxiation by suspension  
suicidalInterment at Rural CemeteryDate permit issued April 9 - 1967Certified by S. Alden Guied M. D.  
in. 2pm

No. 67-1

**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.  
Marie Antoinette  
Name of deceased (Lenfant) Wiseman

If a U. S. War Veteran, specify what war, organization, etc.  
None

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**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on April 10, 1967 12<sup>30</sup> PM

Certified by Leo Bertinazzi  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.



No. 2**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

33 Ward St Worcester, Mass  
Issued to Henry Funeral Service  
Name of Deceased Jean Stepanoff  
Age 79 years 1 months 2 days  
Place of death 5 Redgate Lane Southboro  
Date of death 4-12-1967  
Cause of death Natural Causes - Heart Disease  
pre - Myocardial Infarction  
Interment at Holy Trinity Monastery  
Date permit issued 4-14-67  
Certified by S Alden Guild M. D.

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C. Morris

Name of Deceased

Mary (Egan) McCann

Age ..... years ..... months ..... days

Place of death

Lita's Beauty Salon  
375 Main St. Southboro

Date of death

April 12 - 1967

Cause of death

Natural Causes - Heart disease pre-  
sumably myocardial infarction  
(Sudden death)

Interment at

Rural Cemetery - Southboro

Date permit issued

April 15 - 1967

Certified by

S. Elden Guild

M. D.

No. 67-3**BURIAL (OR REMOVAL) PERMIT**

*This coupon to be returned immediately, properly endorsed*

to Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Mary (Eagan) McCann

If a U. S. War Veteran, specify what war, organization, etc.

None

**ENDORSEMENT**

*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro, Mass.  
(Name of cemetery or crematory) (City or town)

on April 15, 1967 10 50 AM

Certified by Leo B. Tamm, Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub

No. 67-4

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to Donald C Morris

Name of Deceased Louise R. Bertozzi

Age 76 years 8 months 21 days

Place of death 71 School St - Southboro

Date of death June 1, 1967

Cause of death Arteriosclerotic Heart Disease

Interment at Rural Cemetery

Date permit issued June 3-1967

Certified by Timothy P Stone M. D.



To SignNo. 67-4**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Mrs. Rose BertozziIf a U. S. War Veteran, specify what war, organization, etc.  
**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)on June 5, 1967 11<sup>00</sup> AMCertified by Leo Bertozzi Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 67-5**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Donald C MorrisName of Deceased Loise DelandaAge 59 years 6 months 22 daysPlace of death 7 Maple Street JayvilleDate of death July 6 - 1967Cause of death Natural causes - Heart Disease  
myocardial infarctionInterment at Rural CemeteryDate permit issued July 10 - 1967Certified by S Alden Guild M. D.

No. 67-5

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Agent - Board of Health  
(Office issuing permit)

City or Town of Southboro Mass.

Name of deceased Louise Delanda

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery  
(Name of cemetery or crematory) (City or town)

on July 10, 1967 10:05 AM

Certified by [Signature] Supt.  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No.

67-6

**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*

Issued to

Donald C Morris

Name of Deceased

Mark Stephen Gignac

Age

4

years

9

months

6

days

Place of death

44615 Quam Rd

Date of death

November 2 - 1967

Under investigation

Cause of death

Interment at

Rural Cemetery, Souderton

Date permit issued

Nov 3 - 1967

Certified by

S. Alden Guild

M. D.



No. 67-6

**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Agent - Board of Health  
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Mark Stephen Gignac

If a U. S. War Veteran, specify what war, organization, etc.  
\_\_\_\_\_  
\_\_\_\_\_**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southboro  
(Name of cemetery or crematory) (City or town)

on November 4, 1967 11:15 AM

Certified by Leo Bertuzzi  
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.